BOROUGH OF BOOTLE.

EDUCATION COMMITTEE.

SECOND

ANNUAL REPORT

OF THE

SCHOOL MEDICAL OFFICER

ON THE

Inspection of Children in the Bootle Public Elementary Schools.

1909.

Bootle:
Bootle Times, Limited, 30, Oriel Road.

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THE SCHOOL MEDICAL OFFICER'S REPORT.

April 8th, 1910.

To the Chairman and Members of the
Local Education Authority.

GENTLEMEN,

Circular 596 of the Board of Education contains specific instructions as to the matters to be dealt with by the School Medical Officer in his Annual Report to the Local Education Authority.

In compliance with these instructions, I submit the following account of the work done during the year 1909, with respect to the Medical Inspection of School Children.

As this report is also for the information of the Board of Education, it includes statements of local circumstances and conditions which, if only intended for the information of the Local Authority, would be superfluous.

I am, Gentlemen,

Your obedient servant,

WM. DALEY,

School Medical Officer.

BOROUGH OF BOOTLE.

GENERAL REVIEW OF THE HYGIENIC CONDITIONS PREVALENT IN THE SCHOOLS.

The Education Committee considered the reports made by my colleague, Dr. Stitt, on St. John's and Christ Church Schools. It can only be expected that school buildings erected before the passing of the Education Acts would fall considerably below the present day requirements. Many of the defects cannot be remedied; others may be put right at a small cost.

The following is a list of defects which are practically remedial:—

At St. John's School.

(1) Urinal space insufficient. (2) Additional tap for drinking water necessary. (3) Ventilation of several rooms deficient. (4) Additional arrangements for heating required. (5) Desks in some departments of School badly arranged. (6) Gallery in Babies' room undesirable; should be abolished. (7) Present provision of lavatory basins quite inadequate.

Other defects have been reported upon, but have been considered as not practically remedial. These are:—

(1) Insufficient water-closet accommodation for Girls and Infants. (2) Cloakroom accommodation generally inadequate. (3) Boys' staircase dangerously steep. (4) Playground for the Girls and Infants too small. (5) Certain fire places in bad positions. (6) Lighting badly distributed and insufficient. (7) Heating in Infants' main room badly distributed. (8) Curtains obstruct diffusion of light.

With respect to Christ Church School, the following is a list of defects which are practically remedial:—

(1) Present provision of lavatory basins inadequate. (2) Ventilation throughout the School indifferent. (3) Certain stoves either insufficient, in wrong positions, or not protected by a guard. (4) Some desks require re-arrangement; others should have backs provided.

The following defects have been considered as not practically remedial :—

(1) Passages used as cloakrooms; this is very objectionable. Certain cloakrooms badly lighted and ventilated. (2) Stoves in two classrooms in Boys' department, and in classrooms of Girls' department in bad positions and of unsuitable patterns. (3) No corridors; rooms open into each other. (4) Infants' playground not level with the schoolroom. (5) Certain desks in Boys' department in unsuitable positions. (6) Lighting badly distributed. (7) Heating arrangements generally unsuitable. (8) Additional window space required in the Girls' classroom No. 3.

The Committee also considered reports on the sanitary defects at all the schools in the Borough, and as a result the following alterations were made:—

At Bedford Road School.

Drains and surface of Boys' yard repaired. A large ashpit abolished, and movable dustbins provided.

At Salisbury Road School.

Ashpit abolished, and several dustbins provided ; water supply for drinking purposes disconnected from store cisterns over trough water-closets, and now supplied direct from main ; several gully traps relaid, eleven downspouts (which previously discharged foul air dangerously near windows) disconnected from drains, and each made to discharge over a gully trap.

At Linacre Lane School.

Position of the outlet of a ventilating shaft altered.

At Hawthorne Road School.

Two main drains in the Boys' yard found to be defective, and afterwards relaid.

At Gray Street School.

Thirteen wash-basins and two sinks formerly supplied with water from cisterns, now provided with a supply direct from main ; three downspouts

disconnected from drains and made to discharge over gully traps ; trap fixed to waste-pipe of Boys' lavatory.

At St. James' School.

Floor of shelter in Girls' yard, flagging in cellar area, and in Boys' urinal relaid. Two new gully traps fixed to drains.

At St. James' Select School.

Five additional trough-closets provided, and urinal accommodation extended.

In addition to the sanitary defects already remedied, others have been reported upon but have not received attention.

During the year 1909, no alteration was made in the Schedule of Inspections, except to insert a query as to vaccination.

The teachers still continue to give all the assistance possible to facilitate the work. In addition to that mentioned in the first report, they now obtain from the parents the medical history of each child commencing its school career. This course was found advisable, seeing that some parents do not attend when their children are being examined.

During the year under review, 2,550 children were examined. In 1,213 instances (47 per cent.) the parents accepted the invitation to be present at the medical inspection. In these cases, the examining officer, Dr. Stitt, had an opportunity of explaining to and enlisting the co-operation of the person responsible for the child's welfare in the subsequent treatment of the defects reported.

The leaving boys and girls composed 55 per cent. of those examined. Their parents, although invited, were rarely present, being probably of the opinion that the children were themselves capable of giving the necessary information. The average time occupied per head by inspection is about 8 minutes.

CO-OPERATION OF PARENTS IN THE SUBSEQUENT TREATMENT OF DEFECTS.

Many of the older children leave school soon after being examined, and before any record has been obtained as to whether the defects reported have been remedied or not. This circumstance partly accounts for the comparatively low number of defects treated (20·2 per cent.).

The following statements made in the first Annual Report equally apply to the year 1909 :—

"It appears that the parents of the poorer children do not carry out the recommendations or advice of the School Medical Officer, where doing so would entail a financial outlay. On the other hand, the parents of children in fairly good circumstances do, in an appreciable number of cases, act upon the advice given them, and either consult their own doctor or take the child to a hospital. As a rule, however, the parents promise to have the defects attended to, and in minor matters something is done."

"One of the main objects of the new legislation is to stimulate a sense of duty in matters affecting health in the homes of the people, to enlist the best services and interest of the parents, and to educate their sense of responsibility for the hygiene of their children. The increased work undertaken by the State for the individual will mean that the parents have not to do less for themselves and their children, but more. It is in the home, in fact, that both the seed and the fruit of public health are to be found."

DISTURBANCE OF SCHOOL ARRANGEMENTS INVOLVED BY INSPECTION.

Disturbance of school arrangements is inevitable. In some cases the inspection takes place in a cloakroom, but in the majority of schools the teachers usually vacate their private rooms, or empty a classroom so that the Medical Officer can be accommodated.

Many of these rooms are too small or otherwise unsuitable for the purpose of medical inspection. No doubt when future school buildings are erected this matter will receive attention.

NUMBER OF VISITS PAID TO SCHOOLS AND DEPARTMENTS.

	Dr. Stitt.		The School Medical Officer.
For the purpose of routine medical inspections	225	...	—
For the purpose of making arrangements with reference to such inspections	33	...	—
For the purpose of supervising the cleansing and disinfection of the schools	3	...	12
For the purpose of special medical examinations	15	...	25
For the purpose of re-examining children in order to learn what results followed the recommendations given to parents ...	—	...	33
For the purpose of examining school buildings	4	...	20
	280	...	90
Total ...		370	

In compliance with the instructions of the Education Committee, the date of each routine examination made by Dr. Stitt is fixed three days beforehand. This allows sufficient time for the Head Teacher to communicate with parents, inviting their attendance at the inspection, consequently his booked engagements often prevent him from making special visits to schools other than those for which he has already made an appointment.

The principle followed in selecting the children for inspection has been that laid down by the Board of Education. Many of the older children had left school without previous examination. This, however, will in future be avoided as far as is possible.

In many instances the teachers asked for a special inspection to be made with respect to children obviously suffering from some acute illness, or from a defect which interfered with their school work.

These are quite as important as the routine medical examinations, and form a valuable and helpful part of the year's work, as will be seen from the following brief summary :—

SPECIAL INSPECTIONS BY THE SCHOOL MEDICAL OFFICER.

Defects for which the Children were Presented for Examination.

School.	No. of Children examined.	Vision.	Treated.	Adenoids.	Treated.	Ears. Nose.	Treated.	Ringworm.	Treated.	Impetigo.	Treated.	General Health.	Treated.	Minor Infectio's Diseases.	Treated.	Vermin. Head.	Treated.	Vermin. Body.	Treated.
Bedford Road ...	16	3	3	1	1	3	2	...	...	...	...	2	1	...	...	4	4	3	3
Hawthorne Road	19	...	...	3	1	...	...	...	...	6	6	2	2	...	...	3	3	5	5
Linacre Lane ...	21	3	3	...	...	...	...	...	...	3	3	5	4	...	..	5	5	5	5
St. James' ...	48	5	5	3	1	...	..	1	...	1	1	2	1	30	30	4	4	2	2
St. James' Select	15	8	5	...	...	...	...	...	...	2	2	3	2	1	1	1	1	...	...
Salisbury Road..	31	1	1	2	...	...	...	...	...	7	7	6	3	...	...	9	9	6	6
St. Mary's ...	40	6	4	3	1	3	2	...	...	10	10	...	...	...	...	10	10	8	8
St. Winefride's..	13	13	13	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
St. John's ...	9	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	9	9
Gray Street ...	4	...	...	...	...	...	...	...	...	...	...	...	...	...	...	2	2	2	2
Christ Church...	3	...	...	...	...	...	...	...	...	...	...	...	...	...	...	2	2	1	1
Totals ...	219	39	34	12	4	6	4	1	...	29	29	20	13	31	31	40	40	41	41

Special Inspections by Dr. Stitt.

School.	No. of Children examined.	Vision.	Treated.	Adenoids, Nose.	Treated.	Phthisis.	Treated.	St Vitus.	Treated.	Mentally Dull.	Treated.	Jaundice.	Treated.	General Health	Treated.	Vermin. Head.	Treated.
St. Winefride's ...	55	55	15	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Salisbury Road ...	6	6	3	...	...	...	...	...	...	...	...	...	...	...	...	3	3
St. James'	31	5	5	7	5	5	5	1	0	3	0	1	1	3	2	3	3
Totals ...	92	66	23	7	5	5	5	1	0	3	0	1	1	3	2	6	6

Of the 311 children specially examined, 238, representing 76 per cent., afterwards received treatment, this satisfactory result being mainly due to the efforts of the Health Visitors in inducing the parents to obtain medical advice. About 97 other children were seen by Dr. Stitt. These were not found to be suffering from any defect interfering with school work, and records of the cases were not made.

NOSE, THROAT, TONSILS, ADENOIDS AND NECK GLANDS.

At the routine inspections about 31 per cent. of the children were reported to have enlarged tonsils; 10 per cent. to be mouth breathers; and 6·4 per cent. to be suffering from adenoids.

Tonsils do not require removal unless large enough to produce symptoms, and in 795 cases only 39 where placed under this category. The latter were in most cases associated with adenoids and required surgical treatment.

In the 165 cases of adenoids, the presence of these vegetations was inferred from the characteristic facies, the definite obstruction to nasal breathing, and from a history of repeated attacks of nasal catarrh. Digital examinations were rarely made.

In 25 instances, the advice to have the adenoids removed was adopted, and in 29 others palliative medical treatment was carried out.

Mouth breathing, although the most obvious symptom of adenoids, may be in some cases nothing more than a habit, having been set up in the first instance by a catarrh of the nasal mucous membrane, resulting in some temporary enlargement of the lymphatic tissue at the back of the nasal passage, and blocking up the nose. When the catarrh has subsided, the habit of mouth breathing may remain. Of the 269 cases of mouth breathing, 30 were completely cured, whilst many others were found to have improved.

The following table shows that 10·5 per cent. of the children at the age of 5 years suffered from adenoids, whereas only 3·9 per cent. at the age of 13 were found to be so affected.

Age.	No. of children examined.	No. suffering from adenoids.	Percentage defective.
3	31	4	—
4	63	1	—
5	615	65	10·5
6	278	18	6·4
7	133	9	—
8	20	1	—
9	16	2	—
10	92	4	—
11	261	15	5·7
12	362	19	5·2
13	531	21	3·9
14	138	6	—
15	9	—	—
16	1	—	—
	2,550	165	

NUMBER OF CHILDREN IN RESPECT OF WHOM DIRECTIONS WE

School	Number of children inspected	Number of children found with defects	Percentage of children with defects	Cleanliness and condition of						Clothing		Footgear		External eye disease				Vision		Nutrition (Sub-normal).
				Head				Body												
				Dirty	Verminous	Ringworm	Skin Disease	Dirty	Verminous	Needing repairs	Poor	Needing repairs	None	Blepharitis	Conjunctivitis	Diseases of Cornea	Muscular defects	Somewhat defect've	Glasses necessary	
Infants—																				
St. Mary's	51	29	56·8	...	..	...	..	...	1	...	10	4	3	...	...	...	1	...	...	1
Bedford Road... ...	131	115	87·7	...	1	...	1	...	3	2	...	1	..	6	...	...	6	1	2	3
Christ Church ...	55	47	85·4	...	...	...	...	...	..	2	...	...	...	..	2	...	1	...	4	...
Gray Street	161	133	82·6	...	7	..	...	4	4	12	5	7	3	3	...	...	10	...	7	3
Hawthorne Road ...	116	89	76·7	...	3	...	2	2	1	4	4	4	4	7	...	...	6	...	2	3
Linacre	203	161	79·3	...	1	...	1	1	5	2	1	...	...	4	...	...	10	8	3	3
St. James'	150	114	76·0	...	1	...	1	...	1	8	5	4	8	6	...	1	5	1	4	3
St. James' Select ...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
St. John's	58	41	70·6	...	...	1	...	...	1	6	..	6	2	2	..	...	4	...	1	4
St. Winefride's ...	52	48	92·3	...	2	...	...	...	1	1	7	2	4	2	..	...	1	1	...	2
Salisbury Road ...	164	134	81·7	...	5	...	1	1	3	4	6	2	2	3	...	...	9	4	4	4
Girls—																				
St. Mary's	43	36	83·7	...	...	...	1	...	...	3	1	3	2	4	...	1	3	2	12	7
Bedford Road ...	174	145	83·3	...	...	..	...	..	...	...	...	1	...	4	...	...	1	19	34	2
Christ Church ...	10	8	80.0	..	...	..	...	...	..	...	...	...	..	...	...	...	..	2	1	...
Gray Street	136	115	84·5	...	10	...	1	..	...	1	...	2	...	6	2	...	2	10	31	...
Hawthorne Road ..	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Linacre	110	73	66·3	...	...	...	...	...	...	...	...	...	...	1	...	...	1	12	12	...
St. James'	36	32	88·8	..	...	...	..	...	2	2	5	5	1	...	...	...	...	6	4	3
St. James' Select ...	8	7	87·5	...	...	...	...	..	...	1	...	1	...	...	...	..	...	...	1	...
St. John's	84	67	79·7	...	...	...	1	..	1	2	1	4	...	1	...	1	3	9	24	6
St. Winefride's ...	4	4	100·0	..	...	...	..	...	...	...	...	1	...	..	...	...	...	...	1	...
Salisbury Road ...	161	129	80·1	1	3	...	1	1	2	5	2	6	1	5	...	...	3	6	37	6
Boys—																				
St. Mary's	12	9	75·0	...	...	...	...	...	1	6	...	...	4	1	...	..	...	...	2	1
Bedford Road	41	29	70·7	...	...	...	...	..	...	...	...	...	...	...	...	...	1	2	9	...
Christ Church ...	43	29	67·4	...	...	...	...	...	...	...	...	...	...	2	...	...	...	...	7	...
Gray Street	107	78	72·8	...	...	...	3	...	1	6	1	1	2	3	...	.	2	1	21	1
Hawthorne Road ...	18	13	72·2	...	...	...	...	...	...	2	...	1	1	...	...	...	...	2	1	...
Linacre	130	104	80·0	...	...	...	...	1	3	6	..	2	3	2	..	...	2	8	22	1
St. James'	41	34	82·9	...	...	...	3	1	2	12	2	3	5	1	...	...	...	6	3	...
St. James' Select ...	..	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	..	...	...	...
St. John's	94	75	79·7	...	...	...	3	...	...	20	...	4	5	1	...	...	1	4	15	2
St. Winefride's ...	8	6	75·0	...	...	...	...	...	...	3	...	1	...	...	...	...	...	1	...	...
Salisbury Road ...	149	119	79·8	...	...	...	...	1	6	10	8	4	12	8	...	1	3	12	31	6
Totals ...	2,550	2,023	79·3	1	33	1	19	12	38	120	58	69	62	72	4	4	75	117	295	61

GIVEN FOR TREATMENT OF DEFECTS, INCLUDING A CLASSIFIED STATEMENT OF SUCH DEFECTS.

Teeth				Tonsils.				Adenoids		Mouth breathing	Nasal discharge	Glands			Ear Disease—Suppuration	Hearing		Speech			Mental condition		Heart and circulation		Lungs		Nervous system			Tuber-culosis			Rickets			Deformities, spinal disease, &c.			Infectious or contagious disease	Other disease or defect	Actual number of defects reported
Good	Savable	Bad	Oral sepsis	Somewhat enlarged	Enlarged	Much enlarged	Other defects	(?)	Requiring operation			Submaxillary	A. Cervical	P. Cervical		Defects due to Adenoids	Defects due to Other Causes	Lisp	Stammer	Other defects	Backward	Dull	Organic	Functional	Bron.	Dull, &c.	Chorea	Paral.	Other disease	Glandular	Osseous	Pulmonary	Head	Body	Limbs	Spinal curvature	Bone disease	Limbs			
21	...	9	...	1	2	...	...	2	...	1	...	...	4	...	...	...	...	...	...	...	...	...	...	3	4	3	...	...	...	...	...	..	...	..	2	...	...	...	...	1	52
22	3	69	1	30	12	3	...	6	13	22	1	6	22	...	2	...	7	...	2	1	1	..	1	8	23	12	...	...	...	1	...	1	1	2	2	...	...	1	..	8	284
9	1	25	...	15	8	...	...	2	1	3	1	7	4	...	...	...	...	...	...	...	...	...	1	4	11	8	...	...	...	...	...	...	...	...	2	...	...	...	...	1	102
26	4	74	2	21	23	2	...	9	26	34	..	10	22	...	...	...	5	...	...	1	...	...	5	7	24	7	1	...	3	..	...	...	1	1	4	...	...	...	...	11	358
24	3	42	1	12	12	1	...	8	11	15	...	2	12	...	1	...	4	...	...	4	...	1	3	...	16	9	..	...	..	..	...	...	...	2	1	..	...	1	...	6	206
45	8	84	1	50	24	2	1	12	17	25	2	13	11	...	1	...	7	1	...	2	1	2	3	6	22	11	1	...	...	1	...	1	..	3	2	...	...	...	...	2	347
46	1	55	...	27	20	3	...	4	8	12	1	5	18	1	1	1	4	..	1	1	...	2	1	6	22	21	...	...	1	...	...	...	5	2	3	...	...	...	...	7	280
...	...	...	...	...	..	...	...	...	...	..	...	...	..	...	...	...	...	...	...	...	...	...	...	...	..	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
23	2	13	...	9	7	...	...	...	3	2	2	...	3	...	2	...	...	...	...	1	...	...	3	3	9	4	...	...	...	...	1	...	...	1	1	...	...	...	...	4	95
11	2	24	...	15	5	...	...	1	8	8	1	1	9	..	1	...	1	...	1	...	...	...	...	1	13	3	...	...	...	...	...	...	...	1	...	...	...	...	...	5	121
51	6	59	1	24	33	...	1	6	11	16	1	4	19	...	1	...	1	2	1	3	...	1	4	10	21	8	...	...	1	...	...	...	2	2	2	...	...	...	...	11	293
4	...	17	...	7	6	1	...	1	1	2	...	4	2	...	1	...	2	...	...	..	...	...	1	5	3	3	...	...	...	...	1	1	...	...	...	1	...	1	...	1	100
22	3	61	..	30	11	10	2	4	3	8	1	8	13	...	...	...	...	1	1	...	...	1	3	28	19	8	...	...	2	...	1	...	...	...	1	1	..	...	9	287
2	...	5	...	1	1	...	...	...	...	...	...	...	...	...	..	...	...	...	...	...	...	...	...	...	...	1	...	...	...	...	...	...	...	...	...	...	...	...	...	11
21	3	42	...	29	25	3	...	3	11	19	...	4	24	3	1	...	3	...	...	...	...	...	2	25	17	5	...	1	2	...	...	...	1	..	...	1	...	...	...	3	289
..	...	...	...	...	..	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
13	2	29	1	17	11	3	...	6	6	12	2	...	6	...	1	...	3	...	1	...	...	...	2	10	11	2	...	1	...	...	...	...	...	...	1	..	...	...	2	153
6	1	10	1	8	3	1	...	..	1	1	...	...	4	...	...	1	...	...	...	...	...	...	...	6	4	2	..	...	...	...	...	1	1	...	...	...	...	...	3	75
...	...	5	...	2	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1	15
17	...	13	...	14	9	2	1	1	3	5	1	5	6	1	1	...	2	...	...	...	...	...	...	6	6	8	...	...	...	...	3	1	...	1	...	...	...	...	1	143
...	...	1	...	...	...	1	1	1	...	1	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1	...	...	...	...	...	...	...	...	...	...	...	...	...	...	8
28	3	42	...	33	25	3	...	6	3	13	3	3	12	1	...	...	3	...	1	...	...	...	1	15	12	6	...	...	...	...	...	...	...	1	...	...	...	...	2	264
2	1	3	...	4	1	...	...	...	...	..	...	1	...	...	...	...	...	...	...	...	...	...	...	...	..	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
5	...	12	...	7	7	...	...	..	1	3	..	1	..	...	..	...	1	1	...	..	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	24
6	...	9	...	7	2	...	...	...	...	...	...	3	1	...	...	...	...	...	1	...	...	...	...	...	4	1	...	...	...	...	...	...	2	...	...	...	...	...	...	1	53
16	2	29	...	29	6	...	...	2	10	21	..	1	6	...	...	...	2	...	...	...	1	...	...	...	2	2	...	...	...	...	...	...	1	...	...	...	...	...	...	37
1	...	5	...	3	1	1	...	1	...	1	..	...	...	..	...	...	...	...	...	...	...	...	...	5	20	7	...	...	...	...	...	...	1	...	...	...	...	...	...	1	183
16	1	43	1	17	14	1	1	3	14	20	...	3	13	...	...	...	1	...	2	...	...	...	1	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	20
5	...	13	...	8	1	1	...	2	1	2	1	...	...	...	...	...	1	...	1	...	...	1	4	11	12	8	1	...	...	...	1	..	3	..	...	...	1	...	3	228
...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1	1	2	...	1	...	...	...	...	...	...	1	...	...	...	...	...	...	75
15	...	22	1	16	12	...	1	4	3	5	3	11	1	...	...	...	1	...	2	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
...	...	2	...	..	...	...	...	...	...	...	...	...	..	...	...	...	...	...	...	...	...	...	...	3	11	8	...	...	...	1	...	...	...	...	...	...	...	...	2	162
9	2	46	...	25	14	1	...	2	10	18	2	3	10	...	...	...	...	...	2	...	...	...	..	3	11	5	..	...	...	...	1	5	...	...	...	...	...	...	...	7
466	48	863	10	461	295	39	8	86	165	269	22	95	222	6	13	2	48	5	16	13	4	10	37	165	302	151	4	2	9	2	3	8	13	26	23	4	1	4	...	87	4,534

The breathing exercises carried out in the classes have undoubtedly had a beneficial effect. The necessity of such exercises for children with badly developed chests, as well as for those suffering from adenoids and from nasal obstruction, seems to be fully appreciated by the teaching staff.

In order to enlist the co-operation of the parents in this matter, it is proposed that a leaflet be sent to them when deemed necessary, containing the following instructions :—

MOUTH BREATHING.

The Medical Officer finds that your child breathes through the mouth instead of the nose, and is in consequence, more liable to diseases of the throat, nose and chest, than ordinary children.

To bring about the habit of breathing through the nose, the following exercise should be gone through for 10 minutes, three times a day.

During the exercise, the child should stand erect with the mouth firmly closed.

(1) Raise the arms forward and upward, and at the same time draw the breath in slowly and deeply.

(2) Lower the arms sideways and downward, and at the same time breathe out.

If after a month's trial of this exercise the child does not breathe properly through the nose, a doctor should be consulted as a slight operation may be necessary.

Eight minor affections of the THROAT were reported, and 22 cases of NASAL DISCHARGE. When re-examined, two of the former and seven of the latter were found to have been remedied.

ENLARGED NECK GLANDS. 323 children, representing 12 per cent. of those inspected, had either enlarged submaxillary or cervical glands.

The majority were due either to a verminous condition of the head, to carious teeth, or to enlarged tonsils and adenoids. 46 Cures were effected. In only two cases were the glands thought to be tubercular.

TEETH.

It is important to distinguish between the temporary and the permanent teeth when considering the question of decay. It would, however, not be correct to assume that decayed temporary teeth have no effect upon the permanent ones. A decayed tooth of the first set, by contact with the corresponding tooth of the permanent set, frequently induces decay in the latter, almost as soon as it emerges above the gum.

The following table is designed to show the condition of the teeth at each age period in the children examined:—

Age of Scholar.	Number with good teeth.	Number with bad but savable teeth.	Number with one to three bad teeth beyond repair.	Number with four or more bad teeth beyond repair.	Number of children examined.	Percentage		Remarks.
						With good teeth.	With four or more bad teeth beyond repair.	
3	20	1	6	4	31	64	12	All these may be considered as temporary or milk teeth.
4	31	—	20	13	64	48	20	
5	163	22	198	231	614	26	37	
6	44	7	102	125	278	15	44	
7	17	—	47	69	133	12	51	
8	3	—	6	11	20	—	—	
9	1	—	6	9	16	—	—	
10	14	3	49	26	92	—	—	
11	35	3	159	64	261	13	24	All these may be considered as permanent teeth.
12	57	6	200	99	362	15	27	
13	68	5	284	174	531	12	32	
14	10	1	91	36	138	7	26	
15	3	—	4	2	9	—	—	
16	—	—	1	—	1	—	—	
Totals	466	48	1173	863	2550	18	33	

In only 45 cases was the advice to have the teeth attended to adopted.

As in the previous year, many parents refused to employ a dentist, because the child did not complain of toothache, or that the defective teeth would come out themselves in good time.

The following remarks made in the first annual report equally apply to the present one:—

"I am informed that in the lectures on personal hygiene the importance of cleanliness of the teeth and of the daily use of the tooth brush is impressed upon the children. The result of such teaching as revealed by medical inspection is discouraging. Probably, if what is termed "Tooth Drill" were properly organised and carried out in the schools, the results would more than compensate for the trouble involved."

Speaking generally, it has been observed that the poorer children possess the best teeth. One of the reasons advanced for this is that these children are not fed on soft foods so habitually as are the children of better circumstanced parents.

Those children who had sound teeth and yet never cleaned them, generally had jaws of good shape and the teeth not crowded together.

The imperfect mastication of food owing to bad teeth results in retarded, and eventually, impaired digestion, and general ill-health. This in its turn, will account in many cases, for irregular attendance at school.

In order to emphasise the verbal advice given whilst a child is being examined, it is recommended that a leaflet containing the following information be distributed in suitable cases.

TEETH.

REMEMBER—CLEAN TEETH MEAN GOOD HEALTH.

If your teeth are dirty, they contaminate the food you eat, and frequently cause sickness.

To keep the TEETH clean they MUST BE BRUSHED REGULARLY MORNING AND EVENING.

If you have no other powder use a little prepared chalk, which can be bought cheaply at a chemist's. A pennyworth should last quite a long time. Sprinkle a little of the powder on a tooth brush, and rub it up and down and backwards and forwards on each side of your teeth. Be sure to CLEAN BETWEEN THE TEETH, and above all do not forget the back teeth, they are out of sight and decay is not so easily noticeable in them as in the front ones, but remember they do the hardest work and are the most missed when lost.

Chewing crusts does the teeth good. If your teeth are bad, you cannot chew your food properly, therefore you do not get the nourishment out of your food that you should get. If you do not get proper nourishment you will grow up to be weak and puny. ONE BAD TOOTH WILL CAUSE DECAY IN OTHERS; SO IF YOU HAVE A BAD TOOTH, HAVE IT ATTENDED TO by a dentist IMMEDIATELY. DO NOT WAIT TILL IT ACHES or you will perhaps have to lose it. Take care of your teeth if you wish to be strong and well. Bad teeth, besides being ugly, sometimes prevent a person from obtaining employment.

CLOTHING AND FOOTGEAR.

A slight improvement seems to have taken place as a result of medical inspection.

309 Children, representing 12 per cent. of the total examined, were found to be improperly clothed or shod. Many children, however, have received help in this respect from philanthropic sources. As in previous years, the Bootle Canteen Committee and the teachers themselves have accomplished much good work by providing the worst cases with clogs and clothing.

VISION AND EYE DISEASES.

Children under six years do not have their eyesight tested unless special attention is drawn to vision.

The child records its own acuteness of vision by reading test type. If able to read the standard sized type at a distance of six metres (20 feet),

vision is considered to be normal or $\frac{6}{6}$. If type, which should be read at 9, is only clearly seen at six metres, then the visual acuity is recorded as $\frac{6}{9}$, and so on up to $\frac{6}{60}$. In the latter case, the child is only able to read at six metres what should normally have been made out at ten times the distance from the test type.

The following is a summary of the results arrived at :—

Age.	No. of children examined.		Extent of Visual Defect.														Totals.		Percentage $\frac{6}{12}$ or worse.	
			$\frac{6}{9}$		$\frac{6}{12}$		$\frac{6}{18}$		$\frac{6}{24}$		$\frac{6}{36}$		$\frac{6}{60}$		One eye blind.					
	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.
5	2	2	...	...	...	...	...	...	...	...	...	...	...	...	1	1	1	1	...	...
6	145	133	7	2	7	4	...	1	...	1	...	...	1	...	...	...	15	8	5	4
7	65	68	2	3	5	4	...	1	...	...	...	...	...	...	...	1	7	9	...	...
8	8	12	...	...	...	1	...	...	...	...	...	...	...	...	...	...	...	1	...	...
9	12	4	...	...	...	...	...	1	...	...	...	...	...	...	...	...	...	1	...	...
10	42	50	1	4	2	4	2	2	1	2	...	2	...	1	...	...	6	15	...	...
11	106	155	4	12	6	16	8	3	5	5	5	2	...	2	...	...	28	40	22	18
12	159	203	9	16	10	13	5	12	3	10	6	5	1	2	1	...	35	58	16	20
13	236	295	14	32	6	14	12	17	9	16	9	13	1	3	...	1	51	96	15	21
14	82	56	8	3	3	3	2	2	6	2	4	1	2	2	...	...	25	13	...	...
15	6	3	...	...	...	...	...	...	...	1	...	.	...	...		...	...	1	...	...
16	...	1	...	...	...	...	...	...	.	...		1	...	...	...	...	...	1	...	...
Totals	863	982	45	72	39	59	29	39	24	37	24	24	5	10	2	3	168	244	14	17
	1845		117		98		68		61		48		15		5		412		15	

Glasses were recommended in 295 cases where the vision was *$\frac{6}{12}$ or worse, and of these 106, representing nearly 36 per cent., afterwards obtained spectacles.

*In some towns, only children in the fifth and higher standards are recommended to obtain glasses for $\frac{6}{12}$ or for a worse defect; notices calling attention to vision not being sent out in respect of children in the lower standards unless the visual acuity is $\frac{6}{18}$ or worse.

The number of children found to be suffering from external eye diseases will be seen from the following table :—

AGE.	Blepharitis.		Conjunctivitis.		Diseases of Cornea.		Muscular Defects.	
	M.	F.	M.	F.	M.	F.	M.	F.
3	...	1	...	...	...	...	2	...
4	...	...	...	...	...	...	1	...
5	6	9	1	..	...	1	12	11
6	6	2	...	1	...	...	11	7
7	4	3	...	...	...	...	6	3
8	1	1	...	...	...	...	..	...
9	1	...	...	...	...	...	...	..
10	...	1	...	...	...	...	2	1
11	5	2	...	2	...	...	...	2
12	3	8	...	...	...	1	3	5
13	8	7	...	...	1	1	3	5
14	2	2	...	...	...	...	1	...
	36	36	1	3	1	3	41	34
	72		4		4		75	

Two cases of Conjunctivitis and one of Corneal Ulcer received treatment. With respect to the 72 children suffering from Blepharitis 37 were attended to, and 31 of the 75 cases of Squint obtained glasses.

The total number of spectacles obtained by the children (including 57 pairs as a result of the special inspections) amounted to 194, and of these, 97 pairs were given by the Education Committee.

LUNGS.

Many of these cases suffered from simple bronchial catarrh. The number of defects reported was 453, and of these 186, equal to 41 per cent. of those affected, received treatment.

Eight of the children were found to be suffering from Phthisis. In every case where the child was considered to be a source of danger to others, attendance at school was discontinued.

CLEANLINESS AND CONDITION OF THE SKIN, HEAD AND BODY.

Many parents, on receiving notice that the medical inspection of their children is about to take place, at once proceed to bath and cleanse them. Other children, especially the dirty ones, are absent on the day appointed for the inspection.

The statistics relating to the condition of cleanliness, as revealed at the routine inspections, are therefore not an accurate index of everyday conditions. This is fully borne out by the results of special inspections, and by complaints made from time to time by teachers in certain schools.

This explanation is necessary in order to prevent inaccurate deductions being made from the following figures, which relate to the routine examination of 2,550 children :—

Dirty condition of head	1
,, ,, body	12
Verminous condition of body	38
,, ,, ,, head	33
Total	84

Special inspections were made of 311 children. Of these 41 were infested with body vermin, and 46 had verminous heads.

These cases were afterwards followed up by the Lady Health Visitors, who paid repeated visits to the homes of the children, and attempted to inculcate into the minds of careless parents what the word cleanliness means.

The Medical Officers, however, are able to report an improvement in the condition of the scholars, indicating that the visits above referred to have had a beneficial effect. At the same time, it should be stated that it is almost impossible to eradicate vermin (and some contagious diseases to be met with in schools), until each child's cloak peg is used only by that particular child, and is placed at a sufficient distance from other pegs to prevent the clothes coming into contact with those of other children. Overhanging of clothes and headgear scatters broadcast head and body vermin.

Cloakroom pegs should be numbered or labelled, and not indiscriminately used. Children from infested houses could then without great difficulty be rendered, so far as vermin are concerned, harmless to others. Lasting

benefit cannot, however, be expected unless the homes of the children are disinfected and cleansed. This would limit the area of infection, and would protect the careful parent.

Bootle has not put into operation the Cleansing of Persons Act of 1897, and no place has yet been provided where children can be cleansed, although section 122 of the Children Act of 1908 gives all the necessary powers. In many of the verminous cases just recorded, the Health Visitors persuaded the parent to allow the bedding and wearing apparel to be taken away and disinfected by heat ; but as many other children did not possess a change of clothing, the methods available were in their cases not as efficacious as they would otherwise have been if a cleansing station had been used. One necessary adjunct to such a station is the provision of a small steam disinfector, so that the clothing can be dealt with whilst the bath is being used.

Children with verminous heads or bodies should not be allowed to use the ordinary cloakrooms or to play with clean scholars. This, besides being a good object lesson, would possibly result in careless parents taking a greater interest in the condition of their children, and would tend to prevent, to some extent, the dissemination of vermin in the schools, and also to improve the general health of the children. It is impossible to effect a permanent improvement unless pressure is put upon the parents to keep their houses in a more cleanly condition, and this important work can only be done by paying repeated visits to the homes of the dirty children, and by educating their parents.

SKIN DISEASES.

19 Non-parasitic cases were recorded as a result of the routine examinations, and 10 of these were afterwards successfully treated.

RINGWORM.

Bootle children appear to be remarkably free from this disease, only one case being discovered during the routine examination of 2,550 children. A few others, however, were reported to the Medical Officer by the teachers. Medical treatment was recommended in each case.

NUTRITION.

The cases of mal-nutrition numbered 61, and of these, 9, amounting to 14 per cent. of the total, were more favourably reported upon when re-examined at a later date.

The cause of this condition was in some cases the want of food, and in others actual disease. Some improvement followed the provision of free meals in the schools. The visits of the Lady Health Visitors, and the efforts of various charitable institutions, have also led to good results.

In the cases of mal-nutrition, due to actual disease such as tuberculosis, little or no improvement was noticeable.

A great deal of good has resulted from the efforts of the Bootle School Canteen Committee in providing free meals for hungry children. From a report by the Secretary of the Committee on the work done during the six months ended April 3rd, 1909, it is seen that 105,804 breakfasts were given to these children, the daily average being 831. The cost per meal averaged 1½d. In addition to this, the Committee provided 433 pairs of clogs for school children.

The following table gives the average height and weight of the children inspected (according to age at date of inspection and sex):—

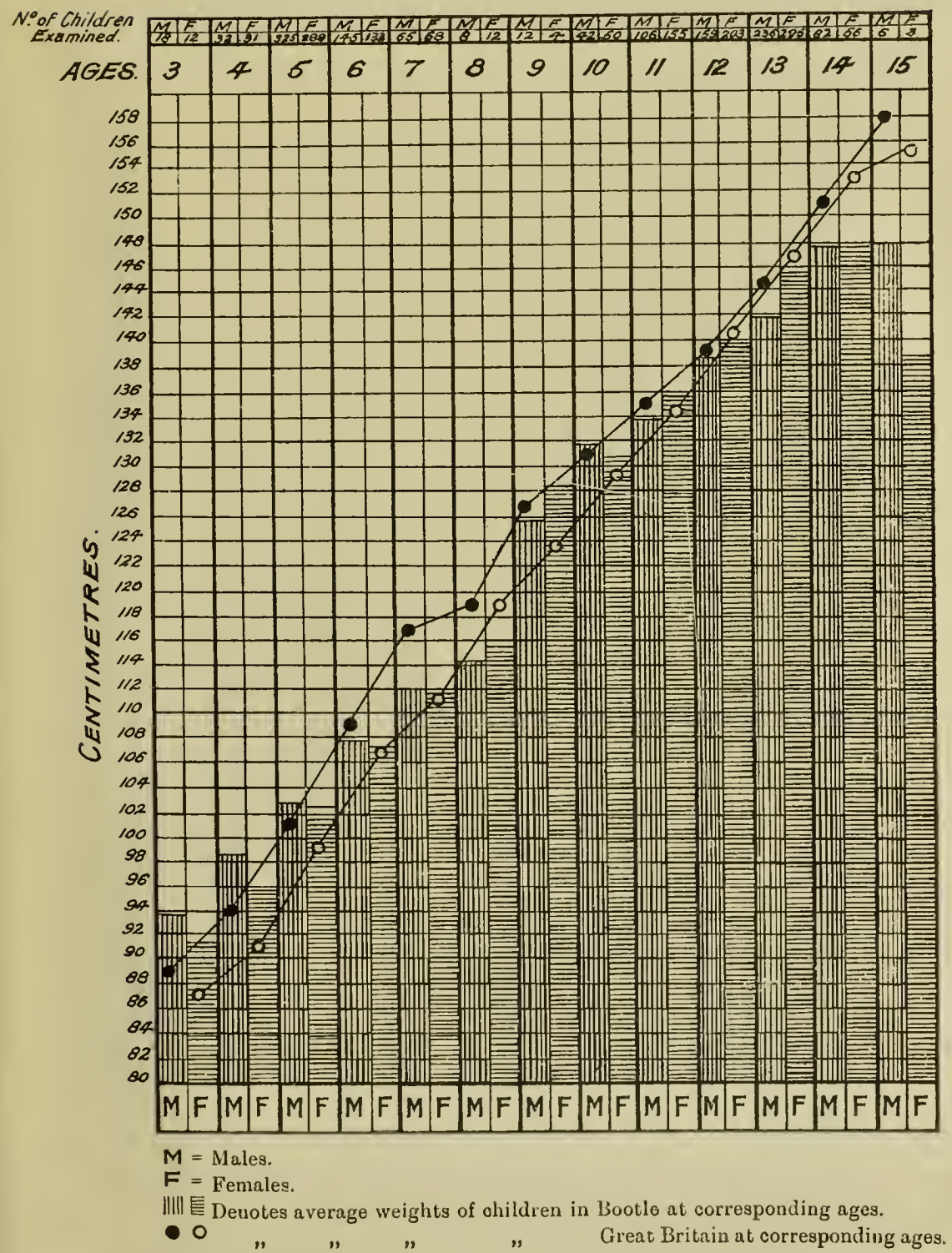
Age.	Number of Children inspected.		Average height in Centimetres.		Average weight in Kilos.	
	Males.	Females.	Males.	Females.	Males.	Females.
3	18	12	93·6	91·2	15·0	14·3
4	32	31	98·5	95·9	16·9	16·0
5	325	289	102·7	102·4	17·5	17·3
6	145	133	107·4	107·0	18·9	18·7
7	65	68	112·0	112·0	20·6	20·0
8	8	12	114·3	115·7	21·7	22·5
9	12	4	125·5	128·5	26·5	25·1
10	42	50	131·7	131·9	28·6	28·4
11	106	155	133·8	135·3	30·0	30·2
12	159	203	138·6	139·4	33·1	32·8
13	236	295	141·8	144·4	34·8	36·4
14	82	56	147·7	147·9	38·7	39·5
15	6	3	148·0	138·8	44·5	38·5
16	—	1	—	156·0	—	54·5
Totals	1,236	1,312 =	2,548			

N.B.—On two occasions the conduct of the children would not permit of their height and weight being ascertained.

In order to more clearly demonstrate the difference between the average height and weight of local children, and the average for similar children throughout Great Britain, the following charts have been prepared :—

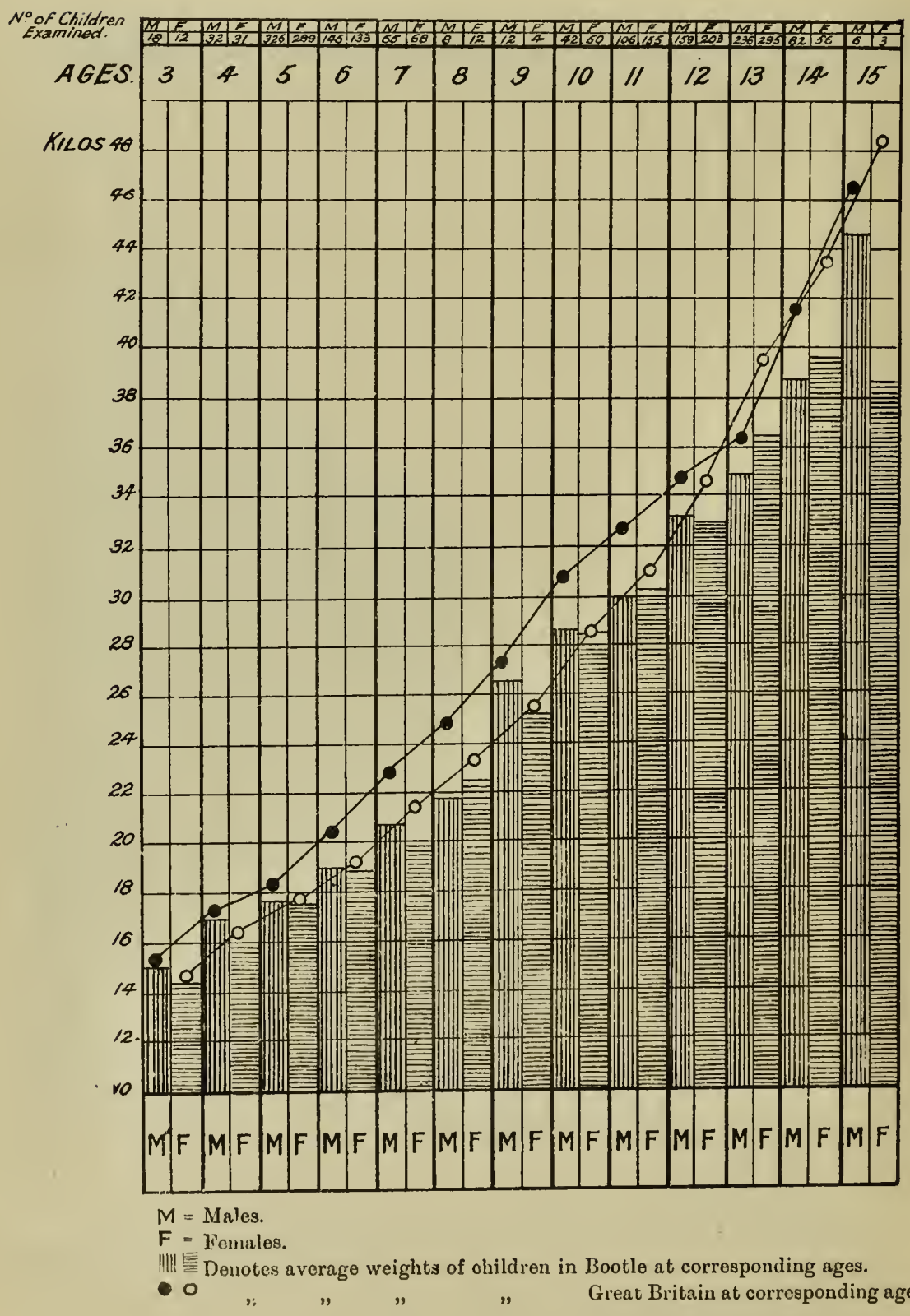
They show the average height (without shoes), and the average weight (with clothes), of school children in Bootle, classified according to age and sex, and similar information relating to the general population of this country.

Average Heights in Centimetres of School Children in Bootle compared with the Heights of Children in the Country generally at Corresponding Ages.



M = Males.
F = Females.
Denotes average weights of children in Bootle at corresponding ages.
" " " " Great Britain at corresponding ages.

Average Weights in Kilos of School Children in Bootle compared with the Weights of Children in the Country generally at Corresponding Ages.



M = Males.
F = Females.
Denotes average weights of children in Bootle at corresponding ages.
" " " " Great Britain at corresponding ages.

In forming deductions, however, as to the average height and weight of children in Bootle, as shown by the tables and charts, it must be noted that some of the averages, e.g., those relating to children at ages 3, 4, 8, 9, 10 and 15 respectively, are based on very small numbers. Too much significance must not be placed upon them ; they simply show the results as far as have yet been ascertained.

HEART AND CIRCULATION.

37 Cases of organic disease of the heart were reported, and 9 received medical treatment.

165 Cases of anæmia were also recorded, and in 24 of these, some improvement took place, probably due to the provision of free meals, &c.

EAR DISEASE AND HEARING.

63 Defects were noted. The number attended to was 18, equal to 28 per cent. of the total. The hearing of the children examined was generally good. Only two of the cases of deafness were reported to be due to the presence of Adenoids, whilst others could be referred to accumulations of wax in the ears, or to a previous attack of Scarlet Fever. No really serious condition was reported under this heading.

RICKETS, DEFORMITIES, SPINAL DISEASES, SPEECH.

The medical examiner has no special remarks to make on these cases. 62 children were reported to be suffering from the effects of Rickets, 9 from Spinal Diseases, Deformities, &c., and 34 from defects of speech, including lisping and stammering. In 5 of the latter cases improvement was reported.

TUBERCULOSIS.

13 Children were found to have tuberculosis in one or other of its forms (glandular, osseous or pulmonary). Those suffering from the pulmonary form, the one most dangerous to others, have already been referred to under the section of this report dealing with the lungs.

MENTAL CONDITION.

14 Children were adversely reported upon and one of these received medical treatment. With these exceptions, the mental condition of those

examined in the elementary schools was found to be excellent, very few being dull or backward.

OTHER DISEASES.

Under this heading are included such defects as hernia, phymosis, prolapsus ani, goitre, abscesses, &c. Of the 87 cases reported 30 received treatment.

ARRANGEMENTS FOR OPEN AIR SCHOOLS, SCHOOL CAMPS, &c.

No arrangements for open air camps have been made. In the summer, however, when the weather permits, classes are held in the playgrounds with beneficial results to the children. An extension of this open-air method of teaching is bound to be followed by further good results.

REVIEW OF ACTION TAKEN TO DETECT AND PREVENT THE SPREAD OF INFECTIOUS DISEASES.

Of the 2,550 children systematically examined, none were found to be at the time suffering from an infectious disease. This remarkable result must be due to the great care exercised by the teachers in excluding from school every child who is obviously ill. Some children, however, who may have only absented themselves for one or two days, return to school apparently quite well, no suspicions being aroused in the minds of the teachers as to the real cause of absence until, after re-attending school for a week or so, the skin is noticed to be peeling. Such is the history of many of the missed cases of Scarlet Fever, and to these the continued prevalence of the disease is mainly attributable.

During the year 189 cases of Scarlet Fever occurred amongst the scholars attending the elementary schools in the Borough.

Owing to the incidence of Measles in the Infants at St. James' School, their department was closed from March 24th until April 7th, 1909.

MEDICAL HISTORY OF THE 2,550 CHILDREN.

Before commencing school life.

1736	or 68	per cent.	had suffered from	Measles.
1063	or 41	,,	,, ,,	Whooping Cough.
678	or 26	,,	,, ,,	Chicken Pox.
266	or 10	,,	,, ,,	Scarlet Fever.
51	or 2	,,	,, ,,	Diphtheria.

Since commencing school life.

188	or 7	per cent.	had contracted	Measles.
25	or 0·9	,,	,,	Whooping Cough.
30	or 1	,,	,,	Chicken Pox.
184	or 7	,,	,,	Scarlet Fever.
22	or 0·8	,,	,,	Diphtheria.

Cases of illness reported by teachers and other officers of the Education Committee:—

School.	Measles.	Chicken Pox.	Whooping Cough.	Other Diseases.	Totals.
Salisbury Road	64	10	29	37	140
Hawthorne Road ...	62	1	7	9	79
Linacre Lane	39	34	3	15	91
Bedford Road	65	6	19	22	112
Gray Street	43	25	12	27	107
St. James'	86	1	4	159	250
St. Mary's	41	1	2	49	93
Christ Church	4	9	8	27	48
St. John's	15	6	—	42	63
St. Alexander's	14	3	—	30	47
St. Winefride's	43	3	2	37	85
Totals	476	99	86	454	1115
Number of visits and re-visits made by Health Visitors...	1235	245	215	1135	2830

SUMMARY OF REPORTS MADE BY DR. STITT TO THE ELEMENTARY EDUCATION SUB-COMMITTEE, TOGETHER WITH HIS OBSERVATIONS ON THE WORK OF ROUTINE MEDICAL INSPECTIONS, DURING THE YEAR 1909.

BOOTLE EDUCATION COMMITTEE.

MEDICAL INSPECTOR'S SUMMARY FOR THE YEAR 1909.

No. of Children Examined, 2,550
,, ,, with defects, 2,023

Children Examined—Infants, Senior Boys and Girls.

	Defects, &c.	No.		Defects, &c.	No.
6.	Cleanliness and condition of (a) Head	54	14.	Hearing	50
	(b) Body	50	15.	Speech	34
7.	Clothing	178	16.	Mental Condition ...	14
7A.	Footgear	131	17.	Heart and Circulation	202
8.	External Eye Disease	155	18.	Lungs	453
9.	Defective Vision ...	412	19.	Nervous System ...	15
10.	Nutrition	61	20.	Tuberculosis	13
11.	Teeth	863	21.	Rickets ...	62
12.	Nose	22	22.	Deformities, Spinal Disease, etc. ...	9
12A.	Throat	269	23.	Infectious or Contagious Disease ...	—
12B.	Tonsils	803	24.	Other Disease or Defect including Oral Sepsis	97
12C.	Adenoids	251			
12D.	Submax and Cervical Glands	323		Total	4,534
13.	Ear Diseases	13			

Remarks :—

In addition to the above, 189 children have been specially examined.

DR. STITT'S OBSERVATIONS.

Personal Hygiene is taught in each school. The importance of regularly cleansing the teeth is constantly urged upon the children both by the School Medical Officers and the teachers. With the exception of some of the senior scholars, little or no result has been observed.

The general cleanliness of all standards has, since Medical Inspection was adopted, much improved.

Cleanliness and Condition of Head and Body.—A considerable general improvement is to be noticed. The children are better cared for where it is

possible, and the parents have by the Medical Inspections begun in many cases to realise the importance of cleanliness.

The Clothing and Footgear of the children in poor districts still leave much to be desired. Charitable societies have done much to relieve this defect, but owing to the poverty prevailing in the town, much still remains to be done.

External Eye Diseases.—The most common are Blepharitis and Strabismus. The former is in many cases cured by medical attendance. In cases of Strabismus many of the parents have taken their children to hospitals or private practitioners and afterwards bought suitable glasses.

In Defects of Vision the above remarks also apply. The constant re-examination and the visits from the Lady Health Visitors have done much to obtain the results recorded.

Teeth.—The condition of the children's teeth in the Borough is generally very bad. It is almost impossible to make the parents realise the evils that spring from carious teeth. In the case of infants, one is constantly met with the remark that "they are only baby teeth."

Tonsils.—A large number of children suffer from enlarged tonsils, but, when necessary, the parents are not unwilling to have them operated on.

Adenoids.—The above remark applies.

Enlargement of Glands.—Numerous children suffer from enlarged sub-maxillary and cervical glands. The former are generally due to carious teeth and seldom proceed to suppuration. The cervical glands are not in many cases serious, but are due to verminous condition of head, &c.

Ear Disease and Deafness.—There are comparatively few cases of ear disease, the hearing of the children generally is good.

Heart and Circulation.—Many of these cases are due to anæmia consequent upon poverty, organic disease rare.

Lungs.—Many of the cases noted are more or less simple in character, such as Bronchial Catarrh, &c.

Tuberculosis is not very common amongst children attending school.

Rickets.—Ditto.

APPENDIX.

THE FOLLOWING FORMS ARE NOW USED IN ADDITION TO THOSE PUBLISHED IN LAST YEAR'S REPORT.

BOOTLE EDUCATION COMMITTEE.

PROVISION OF SPECTACLES.

To the Secretary for Elementary Education.

.....aged.....of.....is suffering from defective vision and requires spectacles. The case is stated to be one in which the parents are unable to themselves provide the glasses.

School Medical Officer.

.....19

VISITOR'S REPORT TO THE SECRETARY.

.....

.....

Visitor.

.....19

SECRETARY'S DECISION.

.....

Voucher No.....issued.....19

Secretary.

.....19

BOOTLE EDUCATION COMMITTEE.

Elementary Education Offices,
Balliol Road, Bootle,

.....191

To the Ophthalmic Surgeon,
Bootle Borough Hospital.

THIS IS TO CERTIFY that the School Medical Officer has reported.....of.....
to be suffering from defective vision, and that the Education Authority consider the case one in which the eye testing and the issue of a prescription for spectacles should be without charge.

Secretary for Elementary Education.

FORM OF REPORT ON THE HYGIENIC CONDITION OF SCHOOLROOMS AND PREMISES.

Name of School..... ....

Department .....

REPORT. OBSERVATIONS.

Sanitary Arrangements—

(1) No. of water-closets and urinals. Average number of males and females using them.

(2) Whether girls and infants share sanitary arrangements.

(3) Water supply for drinking purposes.
Position of cisterns.
Position of various taps.

(4) Lavatories. Number of basins for each department.
Number of scholars using them.

(5) Has caretaker a lock-up slop sink, water tap and cupboard ?

Cloakrooms—

(1) Cleanliness.

(2) Are they passages or not ?

(3) Are they external to schoolrooms and classrooms ?

(4) How are they lighted ?

(5) How are they ventilated ?

(6) Have they separate ingress and egress ?

(7) Note arrangement of hat pegs.
Whether numbered.
Is there one for each child ?

(8) Are cloakrooms fitted with doors so that they can be locked ?

(9) Are there any arrangements for drying clothes and boots ?

REPORT. OBSERVATIONS.

General Arrangements—

(1) Number of classrooms?
(2) Method of Heating.
(3) Form of school building, corridor, central hall, &c.
(4) Cleanliness.
(5) Are there separate entrances to the school for each department and sex?
(6) Do entrance doors open outwards as well as inwards?
(7) Has each department a separate staircase for boys and girls?
(8) Is playground open to sun?
(9) Is building near noisy street or main thoroughfare?
(10) Size of playground?
(11) Is part of playground covered?
(12) Does a covered way connect offices with main building?
(13) Is Infants' playground on same level as school?
(14) Surroundings of school buildings.

CLASSROOMS.

Classroom..... ...

(1) Method of heating.
Is equitable temperature maintained?
(2) Is there a thermometer?
(3) Number of children present.
Cubic air space.
No. of square feet of floor space.
(4) Arrangement of desks.
Are they of suitable design?
State degree of slope.
In what direction does light fall on them?

Classrooms.	Report.	Observations.
Classroom.....		
(5) Method of ventilation.		
(6) Height of room (above 14 feet not counted).		
(7) Is roof impervious to heat and cold?		
(8) Is roof open to apex?		
(9) Defective ventilation. Is it due to means provided, to use of, or to maintenance of means provided?		
(10) Are physical effects of bad ventilation complained of by either teachers or scholars, or both? State effects. Headache, lassitude, debility amongst scholars?		
(11) Does a large portion of each window open for ventilation and cleaning? Give the proportion.		
(12) Is classroom lit by skylight?		
(13) Do windows have both top and bottom panes to open inwards as hoppers?		
(14) Cleanliness.		
(15) Is floor sound proof?		
(16) Are windows glazed with plain glass?		
(17) Note colour of walls.		
(18) Is fireplace or stove protected by guard?		
(19) Note position of fireplace or stove. State if contrary to code.		
(20) Is lighting sufficient?		
(21) Area of each window clear of window sash.		
(22) Distance of each window sill from floor.		
(23) Distance from top of each window to ceiling.		